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Image# 201508129000816013

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Other Th	an An Authorize	ed Committe	ee		Office Use Only	
1. NAME OF	TYPE OR PRIN	T ▼ E>	cample: If typir	ng, type	1 2 P.P. 4 M.C.	Since ode only	
COMMITTEE (in full)			er the lines.	57 71	12FE4M5		
UNIVERSAL HEAI	LTH SERVICES	EMPLOYEES	S' GOOD C	OVERNI	MENT FU	ND	1
ADDRESS (number and stre		GULPH ROAD					
Check if different							
than previously reported. (ACC)	KING OF PR	USSIA			PA	19406	-
2. FEC IDENTIFICATIO	N NUMBER ▼	CITY 🛦		S	STATE 🛦	ZIP CO	DE 🛦
C C00185520		3. IS THIS REPOR		NEW N) OR	× AN (A)	IENDED	
4. TYPE OF REPOR (Choose One)	Report	Feb 20 (M2	2) [May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3	3)	Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4	X	Jul 20 (M7)	Oct :	20 (M10)	Jan 31 (YE)
Quarterly Rep	oort (Q1) (c) 12-	Day	Primary (12F	·)	General	(12G)	Runoff (12R)
July 15 Quarterly Rep	ort (Q2)	E-Election port for the:	Convention (12C)	Special (12S)	
October 15 Quarterly Rep	port (Q3)				, ,	,	
January 31 Year-End Rep	port (YE)	Election on	M M /	D D /	Y	in the State o	of
July 31 Mid-Y Report (Non-e Year Only) (N	election (Y) PO	Day ST-Election port for the:	General (300	G)	Runoff (3	0R)	Special (30S)
Termination R (TER)	Report		M - M /	D = D /	Y = Y = Y	in the	. 🗂
		Election on				State of	ıt
5. Covering Period	06 / 01	2015	through	06	30 /	2015	
I certify that I have examin	ned this Report and t	o the best of my kn	owledge and I	pelief it is true	e, correct and	d complete.	
Type or Print Name of Tre	-	-				· 	
Signature of Treasurer	Cheryl Ramagano		[Electronically	v Filed] Da	ate 08	/ D D /	2015
NOTE: Submission of false,	erroneous, or incompl	ete information may :	subject the pers	son signing th	is Report to th	ne penalties of 2	J.S.C. §437g.
Office Use						FEC FOR Rev. 12/2	
Only							

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

01 2015 06 30 2015 Report Covering the Period: 06 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 197965.69 January 1, 2015 (b) Cash on Hand at 191707.82 Beginning of Reporting Period..... 56881.34 16474.64 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 208182.46 254847.03 6(a) and 6(c) for Column B)..... 6307.80 52972.37 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 201874.66 201874.66 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Report Covering the Period: From: 06	01 2015	To: 06 30 2015
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	9052.70	35584.28
(i) Itemized (use Schedule A)	3 333	
(ii) Unitemized	7421.94	21297.06
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	16474.64	56881.34
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	16474.64	56881.34
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
All Loans Received	0.00	0.00
All Loans neceived		
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(Hom Genedale 110)	5.00	0.00
(h) Lovin Eundo (from Cohodulo HE)	0.00	0.00
(b) Levin Funds (nom Schedule H3)		0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00 0.00 16474.64	56
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	16474.64	56881.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Disbursements COLUMN A Total This Period			
. Operating Expenditures: — (a) Allocated Federal/Non-Federal	rotal filio i elloa	Calendar Year-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	57.80	372.37		
(b) Other Federal Operating	7	012101		
Expenditures	0.00	0.00		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))▶	57.80	372.37		
Transfers to Affiliated/Other Party	0.00	0.00		
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	4500.00	45350.00		
Independent Expenditures	0.00			
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use Scriedule F)		0.00		
Loan Repayments Made	0.00	0.00		
ī				
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
man Folitical Committees	0.00			
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	1750.00	7250.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(**) III - 1 - II O	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Dishumannasta (add Lines 24(1), 22				
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6207.90	50070.07		
20, 27, 20, 20, 21, 20(u), 28 dilu 30(c))	6307.80	52972.37		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	6250.00	52600.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	16474.64	56881.34
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16474.64	56881.34
S. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	OF	21
(check only one)								
×	11a		11b		11c	12		
	13		14		15	16		17

or for commercial purposes, other than usir	ng the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SER	VICES EMPLOYEES' GOOD GOVER	RNMENT FUND
Full Name (Last, First, Middle Initial) Darien Applegate Mailing Address 7074 Pagette Ct		Date of Receipt
Mailing Address 7071 Regatta Ct.		06 19 2015
City Tega Cay	State Zip Code SC 29708	Transaction ID : SA11AI.12954
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 350.00
Name of Employer	Occupation Divisional VP	_
UHS of DE Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. Elizabeth Baisii Mailing Address 12911Monterey Dr.		Date of Receipt
City	State Zip Code	06 26 2015 Transaction ID : SA11AI.12936
Ankorage	AK 99516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer Northstar Behavioral Health	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Geoffrey Botak		Date of Receipt
Mailing Address 601 Allen Lane		06 12 2015 _
City Media	State Zip Code PA 19063	Transaction ID : SA11AI.12981 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer UHS of DE	Occupation CEO	-
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (option	al)	900.00
	mber only)	

	FOR L	PAGE	7	OF	21				
(check only one)									
	X 11	1a	11b		11c	12			
	13	3	14		15	16		17	

or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SERV	ICES EMPLOYEES' GOOD GOVE	RNMENT FUND
Full Name (Last, First, Middle Initial) Charles Boyle		Date of Receipt
Mailing Address 23 Newtown Woods Road		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.12982
Newtown Square	PA 19073	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.40
Name of Employer	Occupation	
UHS of DE	VP and Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.02	
Full Name (Last, First, Middle Initial)	,	
3. Awilda Broco		Date of Receipt
Mailing Address 8-42 Calle Malaga		M = M / D = D / Y = Y = Y
Torrihear	75.0.1	06 26 2015
City	State Zip Code PR 00966	Transaction ID : SA11AI.12930
Guaynato	PR 00966	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
UHS of Delaware Inc	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Michael Carney		Date of Receipt
Mailing Address 105 Muscadine Hill		06 12 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.12989
Madison	MS 39110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	52.50
Name of Employer	Occupation	-
UHS of Delaware Inc.	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	227.50	
SUBTOTAL of Receipts This Page (optional)	435.90
TOTAL This Period (last page this line numl	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	:	8	OF	21	
(check only one)										
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or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SERV	VICES EMPLOYEES' GOOD GOVE	RNMENT FUND
Full Name (Last, First, Middle Initial) Margaret Covelli		Date of Receipt
Mailing Address 672 Hetchen Post Dr.		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.12994
Henderson	NV 89011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
UHS of DE	CNO	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) 3. Ruth Dukoff	1	Date of Receipt
Mailing Address 15830 far View Place		06 26 2015
City	State Zip Code	Transaction ID : SA11AI.12935
Anchorage	AK 99516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
NorthStar DeBarr	Assistant Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Leonard Freehof	'	Date of Receipt
Mailing Address 5212 fiore Bella Blve		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.13003
Las Vegas	NV 89135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
UHS of DE	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional	al)	900.00
TOTAL This Period (last page this line nun	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE	PAGE	9	OF	21				
(check only one)									
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using t	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SERVI	CES EMPLOYEES' GOOD GOVER	RNMENT FUND
Full Name (Last, First, Middle Initial) A. Gary Gilberti		Date of Receipt
Mailing Address 43 Newell Dr.		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.13005
Franklin	MA 02038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	
UHS of DE	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	235.00	
Full Name (Last, First, Middle Initial) 3. Alan Gonzalez		Date of Receipt
Mailing Address 509 Beverly Drive		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.13007
Laredo	TX 78045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Fort Duncan Medicl Center	Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Laurence Harrod		Date of Receipt
Mailing Address 252 Woodland Road		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.13009
Wrightstown	PA 18940	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	74.92
Name of Employer	Occupation	
UHS of DE	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	308.30	
SUBTOTAL of Receipts This Page (optional).	•	359.92
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	. ′	10	OF	21	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SERVI	CES EMPLOYEES' GOOD GOVER	RNMENT FUND
Full Name (Last, First, Middle Initial) John Holinnsworth Mailing Address 15001 Glendower Dr.		Date of Receipt
Maning Address 15001 Glendower Dr.	06 12 2015	
City	State Zip Code	Transaction ID : SA11AI.12968
Louisville	KY 40245	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
UHS of Delaware Inc.	Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Roslind Hudson Mailing Address 244 Outlines		Date of Receipt
Mailing Address 211 Outrigger		06 05 _2015 _
City	State Zip Code	7 Transaction ID : SA11AI.12919
Saint Augustin	FL 32084	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer	Occupation	
UHS of DE	CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) David Jamin		Date of Receipt
Mailing Address 3649 Lakeshore		06 12 / Y Y Y Y Y
City Enid	State Zip Code OK 73703	Transaction ID : SA11AI.12966 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
UHS of Delaware Inc.	CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).	>	1100.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	1	11	OF	21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Karen Johnson Mailing Address 845 N. Kingsburg		Date of Receipt
	77. 0. 1	06 12 2015
City Chicago	State Zip Code IL 80613	Transaction ID : SA11AI.13014
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 350.00
Name of Employer	Occupation	
UHS of Delaware Inc.	Divsion SVP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Justin Krueger	•	Date of Receipt
Mailing Address 109 Laurel Oak Drive		06 12 _2015 _
City Aiken	State Zip Code SC 29803	Transaction ID : SA11AI.12972 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Aiken Regional Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Fransisco Lopez		Data of Pagaint
Mailing Address 55 Goldfinch Circle		Date of Receipt
City Phoenixville	State Zip Code PA 19460	06 12 2015 Transaction ID : SA11AI.13019 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	
UHS of Delaware Inc.	VP	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
Other (speedly)	155.55	

TOTAL TROMBETA					PAGE	 12	OF	21
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	g the name and address of any political committee			
, ,	/ICES EMPLOYEES' GOOD GOVE	RNMENT FUND		
Full Name (Last, First, Middle Initial) Douglas Matney Mailing Address 100 E. Cornell Ave.	Date of Receipt			
City	State Zip Code	06 12 2015 Transaction ID : SA11AI.12964		
McAllen	TX 78504	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer	Occupation			
McAllen Medical Center	VP			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	500.00			
Full Name (Last, First, Middle Initial) Jonathan McDonald	Date of Receipt			
Mailing Address 7450 Falazon Court	M M / D D / Y Y Y Y Y			
City	State Zip Code	06		
Nampa	ID 83686	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	60.00		
Name of Employer	Occupation	-		
UHS of Delaware Inc.	CFO			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00			
Full Name (Last, First, Middle Initial) Philip Moraci	I	Date of Receipt		
Mailing Address Saratoga Glen		06 05 2015		
City Saratoga Springs	State Zip Code NY 12866	Transaction ID : SA11AI.12905 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer	Occupation			
UHS of DE	VP			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	250.00			
SUBTOTAL of Receipts This Page (optiona	1)	810.00		
TOTAL This Period (last page this line num	ther only)			

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SERV	ICES EMPLOYEES' GOOD GOVER	RNMENT FUND		
Full Name (Last, First, Middle Initial) A. Bradley Neet		Date of Receipt		
Mailing Address 30771 Moonflower Lane	06 12 2015			
City	State Zip Code	Transaction ID : SA11AI.13024		
Murrieta	CA 92563	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	120.00		
Name of Employer	Occupation			
UHS of Delaware Inc.	Administrator			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	470.00			
Full Name (Last, First, Middle Initial) 3. Alan Olive		Date of Receipt		
Mailing Address 9965 Bandana Way	06 12 2015			
City	State Zip Code	Transaction ID : SA11AI.13025		
Reno	NV 89521	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer	Occupation			
UHS of Delaware Inc.	CEO			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address 2209 Paint Meadows Dr.		06 12 2015		
City	State Zip Code	Transaction ID : SA11AI.13029		
Las Vegas	NV 89134	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	400.00		
Name of Employer	Occupation			
UHS of DE	Group VP			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General				
Other (specify) ▼	400.00			
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	770.00		
TOTAL This Period (last page this line numb	per only)			

				PAGE	14	4 OF	21
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or for commercial purposes, other than usin	ig the name and address of any political committee					
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SER'	VICES EMPLOYEES' GOOD GOVE	ERNMENT FUND				
Full Name (Last, First, Middle Initial) Vance Reynolds						
Mailing Address 230 Magnolia Lake Road	06 12 2015					
City	State Zip Code	Transaction ID : SA11AI.12974				
Aiken	SC 29803	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation					
UHS of Delaware Inc	CEO					
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General						
Other (specify) ▼	250.00					
Full Name (Last, First, Middle Initial) Janice Richardson		Date of Receipt				
Mailing Address 621 Preakness Way	06 12 2015 _					
City	State Zip Code	Transaction ID : SA11AI.13035				
Bowling Green	KY 42104	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	60.00				
Name of Employer	Occupation	\dashv				
UHS of DE	CEO					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	340.00					
Full Name (Last, First, Middle Initial) C. Krista Roberts	I	Date of Receipt				
Mailing Address 5 Santa Fe Lane		06 26 2015				
City	State Zip Code	Transaction ID : SA11AI.12938				
Enid	OK 73703	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer	Occupation					
UHS of DE	C00	_				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	300.00					
SUBTOTAL of Receipts This Page (options	al)	610.00				
	•					
TOTAL This Period (last page this line nur	nder only)					

FOR LIN	E NUMBER	: PAGE	15 OF	21
(check or	nly one)			
X 11a	11b	11c	12	
13	14	15	16	17

or for commercial purposes, other than usin	ig the name and address of any political committee					
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SER	VICES EMPLOYEES' GOOD GOVE	ERNMENT FUND				
Full Name (Last, First, Middle Initial) Jose Rodriguez Mailing Address 504 F Ramsever Road						
City Edinburg	State Zip Code TX 78541	Transaction ID : SA11AI.13036				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 48.00				
Name of Employer	Occupation					
UHS of DE	CEO					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	216.00					
Full Name (Last, First, Middle Initial) 3. Manuel Rodriguez		Date of Receipt				
Mailing Address 12911 Monterey Circle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	06 26 2015 Transaction ID : SA11AI.12937				
Anchorage	AK 99516	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer	Occupation					
NorthStar DeBarr	Physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address 4516 N. Outback Road		M = M / D = D / Y = Y = Y				
City	State Zip Code	06 12 2015 Transaction ID : SA11AI.13037				
Bloomington	IN 47404	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	85.00				
Name of Employer	Occupation					
UHS of Delaware	CEO	_				
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	345.00					
SUBTOTAL of Receipts This Page (options	al)	433.00				
	· ·					
TOTAL This Period (last page this line nur	mber only)					

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR I	LINE NU	JMBER:	:	PAGE	. 1	16	OF	21
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	X 1	1a	11b		11c		12		
	1	3	14		15		16		17

or for commercial purposes, other than using t	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SERVI	CES EMPLOYEES' GOOD GOVEF	RNMENT FUND
Full Name (Last, First, Middle Initial) Stanley Tatum		Date of Receipt
Mailing Address 9599 Oak Meadow Lane		06 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.12921
Pilot Point	TX 76258	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer	Occupation	
UHS of DE	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
Full Name (Last, First, Middle Initial) 3. Darlene Wetton		Date of Receipt
Mailing Address 40184 Annapolis Dr.		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.13046
Temecula	CA 92591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer	Occupation	
UHS of Delaware Inc	CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) John Willingham		Date of Receipt
Mailing Address 2 Walnut Trace Court S		06 12 2015
City	State Zip Code	Transaction ID : SA11AI.12961
Simpsonville	SC 29681	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
UHS of DE	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggiogate real to bate ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional).		1580.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	_		_	MBER	:	PAGE	 17	OF	21
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16	,	17

or for commercial purposes, other than usi	ng the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UNIVERSAL HEALTH SER	VICES EMPLOYEES' GOOD GOVER	RNMENT FUND
Full Name (Last, First, Middle Initial) Gene WInters Mailing Address BO Rev 748		Date of Receipt
Mailing Address PO Box 748		06 12 2015
City Bushland	State Zip Code TX 79102	Transaction ID : SA11AI.12962
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	153.88
Name of Employer	Occupation	
UHS of Delaware Inc	CFO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	692.46	
Full Name (Last, First, Middle Initial) 3.	·	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (option	nal)	153.88
TOTAL This Period (last page this line nu	mber only)	9052.70

SCHEDULE B (FEC Form 3X)		FOD I INT	NUMBER: PAGE 18 OF 21
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	INGIVIDEIT.
II EIVIIZED DISDURSEIVIEN IS	for each category of the	21b	22 🔀 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem	ente may not be cold or us	ed by any perce	on for the nurnose of soliciting contributions
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
UNIVERSAL HEALTH SERVICES	EMPLOYEES' GOO	OD GOVER	NMENT FUND
		JD JOVEN	
Full Name (Last, First, Middle Initial)			
A. GRAHAM FOR CONGRESS			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 310			06 22 2015
City	tate Zip Code		
TALLAHASSEE	FL 32302		Transaction ID: SB23.13062
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	0500.00
		Type	2500.00
	ent For: 2015		
	Primary General		
	Other (specify) ▼		
Full Name (Last, First, Middle Initial) B. MFFHAN PATRICK I MR			Date of Disbursement
B. MEEHAN, PATRICK L MR.			
Mailing Address 1029 EDMONDS AVENUE			06 15 2015
5 1020 EDMONDO //VENOE			
,	tate Zip Code		Transaction ID : SB23.13060
	PA 19026		
Purpose of Disbursement			Amount of Each Dishursoment this Davied
Candidate Name			Amount of Each Disbursement this Period
Canadato Hamo		Category/ Type	1500.00
Office Sought: House Disbursem	ent For: 2015	туре	
	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
C. TEXANS FOR HENRY CUELLAR CO	NGRESSIONAL CA	MPAIGN	Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 1519 WASHINGTON STREET			06 10 2015
SUITE 200 City S	tate Zip Code		
-	TX 78040		Transaction ID : SB23.13049
Purpose of Disbursement			
		1 []	Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
		Type	500.00
	ent For: 2015		
	Primary General		
State: District:	Other (specify) ▼		
State. District.			
SUBTOTAL of Disbursements This Page (optional)			4500.00
COSTOTAL OF DISDUISCINGING THIS Fage (optional)			5 5
TOTAL This Period (last page this line number only).			4500.00

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	•	Use separate schedule(s	FOR LINE	
ΙT	EMIZED DISBURSEMENTS	for each category of the	(orlean orling	
		Detailed Summary Page	21b	22 23 24 25 26
		, ,	27	28a 28b 28c X 29 30b
ΙA	ny information copied from such Reports and Statem	nents may not be sold or u	sed by any perso	on for the purpose of soliciting contributions
	for commercial purposes, other than using the name			
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	UNIVERSAL HEALTH SERVICES	EMPI OVEES' CO		NIMENT FLIND
I/	UNIVERSAL HEALTH SERVICES	LIVIFLUTEES GU	OD GOVER	ANIVILINI I UND
$oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{ol{ol}}}}}}}}}}}}}}}}}$	Full Name (Last, First, Middle Initial)		ı	
٨	•			Date of Dichursement
۸.	Friends for John Eklund			Date of Disbursement
	NA III A LL COLOR III COLO			M M / D D / Y M Y M Y
	Mailing Address 12040 Burlington Glen Drive			06 12 2015
	0			
		State Zip Code		Transaction ID : SB29.13058
	5.1a. do.1	OH 44024		
	Purpose of Disbursement			
			H H	Amount of Each Disbursement this Period
	Candidate Name		Category/	
			Type	250.00
	Office Sought: House Disbursen	nent For: 2015		
	Senate	Primary General		
		Other (specify)		
	State: District:	Caller (opoonly) ▼		
_				
	Full Name (Last, First, Middle Initial)			
В.	Friends of Faber			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 7706 State Route 703			06 12 2015
	,	State Zip Code		Transaction ID : SB29.13052
		OH 45822		11a113aCuoti ID . 3D23.13U32
	Purpose of Disbursement			
				Amount of Each Disbursement this Period
	Candidate Name		Catagory	
			Category/ Type	500.00
	Office Sought: House Disbursen	nent For: 2015	.,,,,	, , , , , , , , , , , , , , , , , , ,
		Primary General		
		Other (specify) ▼		
_	State: District:			
	Full Name (Last, First, Middle Initial)			
C.	Oelslager for Ohio Committee			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 6706 Lake Cable Ave. NW			06 12 2015
	City	State Zip Code		Transaction ID ODGG 40050
		OH 44720		Transaction ID : SB29.13056
	Purpose of Disbursement			
				Amount of Each Disbursement this Period
	Candidate Name			Amount of Lacif Disbursement this Feliod
			Category/	500.00
	Office Cought: House Distance	ant Fore 2017	Туре	<u></u>
		nent For: 2015		
		Primary General		
		Other (specify) ▼		
_	State: District:			
Г				
٩	SUBTOTAL of Disbursements This Page (optional)			1250.00
Ľ				
1	TOTAL This Period (last nage this line number only)			1

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SCHEDULE B (FEC Form 3X)		FOD :::::	NUMBER: PAGE 20 OF 21
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	NOMBER.
II EINITEN NISDAUSEMEN 19	for each category of the	21b	22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c X 29 30b
Any information copied from such Reports and State	ments may not be sold or us	ed by any perso	
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
$\mid \; angle$ universal health services	SEMPLOYEES' GOO	DD GOVEF	RNMENT FUND
Full Name (Look First Middle Initial)			
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. Team Burke			M M / D D / Y Y Y Y
Mailing Address 275 West 4th Street			06 12 2015
City	State Zip Code		Transaction ID : SB29.13054
Marysville Purpose of Disbursement	OH 43040		
r dipose of Disbursement		· · ·	Amount of Each Disbursement this Period
Candidate Name		Catagony	
		Category/ Type	500.00
Office Sought: House Disburse	ement For: 2015		
Senate	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial) B.			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
. a.pood of Dioxardomom			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	
	ment For:		
Senate	Primary General		
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address			
City	State 7in Code		
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Туре	
Senate Disburse	Primary General		
President	Other (specify)		
State: District:	, , , , , , , , , , , , , , , , , , ,		
<u> </u>			
SUBTOTAL of Disbursements This Page (optional)			500.00
			1750.00
TOTAL This Period (last page this line number only	/)		1750.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	21	С	F	21	
FOR I	LINE	21a	OF	FORM	зх

NAME OF COMMITTEE (In Full)

	INIVERSAL HEALTH SERVICE		n ID : H4.13064	55 55 (2.	Allocated Activity or Event:
A.	Full Name (Last, First, Middle Initial) Wells Fargo Bank	Transactio	n ID : H4.13064		
	Mailing Address PO Box 63020				Administrative Fundraising Exempt Voter Drive Direct Candidate Support
	City	Ctata	7:- Cada		
	City San Francisco	State CA	Zip Code 94163		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	<u> </u>	01100		- Allocated Activity or Event Year-To-Date
	Asticitus on Frank Islandifform				372.37
	Activity or Event Identifier: Administrative			Category/ Type	Date 06 11 2015
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00		7	57.80	57.80
<u> —</u> В.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
					Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				
	Activity or Event Identifier:				
	Activity or Event Identifier:			Category/ Type	Date/ D D / Y Y Y Y Y
	EEDEDAL CHARE		NONEEDEDAL		TOTAL ALIQUNIT
	FEDERAL SHARE	+	NONFEDERAL	SHARE	TOTAL AMOUNT
	FEDERAL SHARE		NONFEDERAL	SHARE	= TOTAL AMOUNT
<u></u>			NONFEDERAL	SHARE	Allocated Activity or Event:
<u>c.</u>	Full Name (Last, First, Middle Initial)		NONFEDERAL	SHARE	Allocated Activity or Event:
<u>c</u> .			NONFEDERAL	SHARE	Allocated Activity or Event:
<u>c</u> .	Full Name (Last, First, Middle Initial)	State	Zip Code	SHARE	Allocated Activity or Event: Administrative Fundraising Exempt
c.	Full Name (Last, First, Middle Initial) Mailing Address City		7 1 7	SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:		7 1 7	SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C .	Full Name (Last, First, Middle Initial) Mailing Address City		7 1 7		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:		7 1 7	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
C.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement:		7 1 7	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
<u>с.</u>	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State	Zip Code	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
C.	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State	Zip Code	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	State +	Zip Code NONFEDERAL	Category/ Type SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE UBTOTAL of Allocated Federal and NonFederal	State +	Zip Code NONFEDERAL 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Category/ Type SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT
SI	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE UBTOTAL of Allocated Federal and NonFederal SHARE 0.00	State + ral Activity Th	Zip Code NONFEDERAL is Page NONFEDERAL	Category/ Type SHARE SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT 57.80
SI	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE UBTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	State + ral Activity Th	Zip Code NONFEDERAL is Page NONFEDERAL	Category/ Type SHARE 57.80 NonFederal sh	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT 57.80
SI	Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE UBTOTAL of Allocated Federal and NonFeder FEDERAL SHARE 0.00 OTAL This Period (last page for each line on	State + ral Activity Th	Zip Code NONFEDERAL is Page NONFEDERAL are to 21(a)(i) and	Category/ Type SHARE 57.80 NonFederal sh	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT 57.80 are to 21(a)(ii))